

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

07/27/00
JC8036 U.S. PTO

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JC836 U.S. PTO
07/27/00

Applicant: Atsushi MURASHIMA
Title: SPEECH SIGNAL DECODING
METHOD AND APPARATUS
Appl. No.: Unassigned
Filing Date: 07/27/2000
Examiner: Unassigned
Art Unit: Unassigned

UTILITY PATENT APPLICATION
TRANSMITTAL

Assistant Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Atsushi MURASHIMA

Enclosed are:

- Specification, Claim(s), and Abstract (43 pages).
- Formal drawings (5 sheets, Figures 1-5).
- Declaration and Power of Attorney (2 pages).
- Assignment of the invention to NEC CORPORATION.
- Assignment Recordation Cover Sheet.
- Information Disclosure Statement.
- Form PTO-1449 with copies of 4 listed reference(s).

The filing fee is calculated below:

| | Claims as Filed | Included in Basic Fee | Extra Claims | Rate | Fee Totals |
|---|--------------------|--------------------------|-------------------|------------------------------------|-----------------|
| Basic Fee | | | | \$690.00 | \$690.00 |
| Total Claims: <u>20</u> | - <u>20</u> | = <u>0</u> | x <u>\$18.00</u> | = <u>\$0.00</u> | |
| Independents: <u>4</u> | - <u>3</u> | = <u>1</u> | x <u>\$78.00</u> | = <u>\$78.00</u> | |
| If any Multiple Dependent Claim(s) present: | | | + <u>\$260.00</u> | = <u>\$0.00</u> | |
| | | | | SUBTOTAL: | <u>\$768.00</u> |
| <input type="checkbox"/> Small Entity Fees Apply (subtract 1/2 of above): | | | | = | <u>\$0.00</u> |
| | | | | Assignment Recordation Fee: | <u>\$40.00</u> |
| | | | | TOTAL FILING FEE: | <u>\$808.00</u> |

A check in the amount of \$808.00 to cover the filing fee is enclosed.

The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

The Assistant Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Assistant Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

By

Philip J. Antiochia

Reg. No.
38,819

for /

David A. Blumenthal
Attorney for Applicant
Registration No. 26,257

Date July 27, 2000

FOLEY & LARDNER
Washington Harbour
3000 K Street, N.W., Suite 500
Washington, D.C. 20007-5109
Telephone: (202) 672-5407
Facsimile: (202) 672-5399